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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: CereMedix, Inc.Application No./Patent No.: 6880889Filed/Issue Date: 5/10/2005Entitled: Compositions and methods for counteracting effects of reactive oxygen species and free radicalsCereMedix, Inc.
(Name of Assignee)Corporation
(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

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A ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 011288, Frame 9709, or for which a copy thereof is attached.

OR
B ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below.

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☐ Additional documents in the chain of title are listed on a supplemental sheet.

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(NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08)

The undersigned (whose file is supplied below) is authorized to act on behalf of the assignee.

Steven Kates
Signature

Vice President, Research
Printed or Typed Name
Title

7/15/05
Date
978 897 5139
Telephone Number

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to prepare, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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ATTORNEY WITH
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AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/715,763
Filing Date	11/17/2000
First Named Inventor	Viktor Shashoua
Art Unit	1633
Examiner Name	Desai, Anand U
Attorney Docket Number	6285-1US

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

29858

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

29858

OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)

SIGNATURE of Applicant or Assignee of Record

Name

Signature

Date

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

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